OFFICES OF

H. MICHAEL BRUCKER ATTORNEY AT LAW

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5855 DOVLE STREET, SUITE 110 EMERYVILLE, CALIFORNIA 94608 TEL: 510 654 6200 FAX: 510 654 6166

VIA FAX (571) 273-6500

March 21, 2006

Attention: Refund Branch

Re: Refund of 2202 Extra Claims Fee Patent Application No. 09/927,104

> Docket: WCTI2001 Applicant: F. O'Meany

To Refund Section:

This is a request for a refund of the Code 2202 extra claims fee of \$125.00 paid in connection with the above-referenced patent application. When the application was filed, we had 26 claims and we paid for the 6 extra claims. We now have 27 claims in the application, so we owe \$25 for one claim. When the application was filed, we had 6 independent claims and we paid for the 3 extra independent claims. We now owe \$100 for one additional independent claim. Thus, the total amount owed is \$125, not \$250 as demanded.

I am enclosing copies of the Notice Requiring Excess Claims Fees, our original New Application Transmittal showing our fee calculation, and our Credit Card Form authorizing \$250 be charged in order to comply with the Notice Requiring Excess Claims Fees. Please refund \$125.

If you require further documents, please let me know.

Very truly yours,

H. Michael Brucker

HMB:ceh Enclosures

Best Available Copy



UNITED STATES PATENT AND TRADEMARIC OFFICE

Commissioner for Palents United States Patent and Trademark Office P.O. Box 1450 Alexandria, VA 22313-1450

2006 APR 18 PH 1:12

US PATENT & TRADEMARK

NOTICE REQUIRING EXCESS CLAIMS FEES

The excess claim(s) filed on <u>020306</u> is not accompanied by the appropriate payment of excess claims fees set forth in 37 CFR 1.16(h)-(j) or 1.492(d)-(f). Excess claims fees are required for each claim in independent form in excess of three (§ 1.16(h)), each claim (whether dependent or independent) in excess of twenty (note that § 1.75(c) indicates how multiple dependent claims are considered for fee calculation purposes) (§ 1.16(i)), and each application that contains a multiple dependent claim (§ 1.16(j)).

Since the application is not under a final rejection, applicant is given a time period of ONE (1) MONTH or THIRTY (30) DAYS from the mailing date of this notice, whichever is longer, to submit either: (1) the fee payment of \$250.00, or (2) an amendment in compliance with 37 CFR 1.121 that cancels the excess claim(s), in order to avoid ABANDONMENT. Extensions of this time period may be granted under 37 CFR 1.136, unless the excess claim(s) was presented in a preliminary amendment.

		a preliminary amendment.
	1,	The funds in Deposit Account No are insufficient to cover the entire fee due. The balance is due within the time period set forth in this notice. See note below regarding the appropriate service charge.
	2.	The Credit Card payment to cover the entire fee due to Account (Card type + last 4 digits ONLY) was refused. The balance is due within the time period set forth in this notice. See note below regarding the appropriate service charge.
\boxtimes	3.	The amendment that includes the excess claim(s) has not been entered, since applicant has failed to remit (or authorize charge to a Deposit Account or Credit Card) the fee as indicated on the attached Patent Application Fee Determination Record (PTO/SB/06). Remittance or authorization is due within the time period set forth in this notice.
	4.	The fee submitted in this application is insufficient. A balance of \$ is due for presentation of excess claims (37 CFR 1.16(h)-(j) or 1.492(d)-(f)).
	5 .	Other.
service c	harg	Provide specific details of the required correction in order to assist the applicant. Indicate whether a e has been added to the fee due):
no250	!	

THE AMOUNT OF THE FEE(S) DUE IS SUBJECT TO CHANGE, GENERALLY ON OCTOBER 1 OF EACH YEAR (37 CFR 1.16, 1.21 & 1.492). THE AMOUNT OF THE FEE(S) DUE IS DETERMINED AS OF THE DATE A COMPLETE REPLY WITH THE APPROPRIATE FEE(S) IS RECEIVED BY THE OFFICE (37 CFR 1.8 & 1.10). BECAUSE THE AMOUNT DUE IS SUBJECT TO CHANGE, IT IS RECOMMENDED THAT APPLICANT CHECK THE CURRENT FEE SCHEDULE WHICH IS AVAILABLE ON THE USPTO'S WEBSITE AT: http://www.uspto.gov/web/offices/ac/gs/ope/fees.htm

Service Charges: There is a \$50 service charge for processing each payment refused (including a check returned "unpaid") or charged back by a financial institution (37 CFR 1.21(m)). There is a \$25.00 service charge for each month when the balance of a deposit account is below \$1000 at the end of the month (37 CFR 1.21(b)(2)).

2100 (571) 272 - 3622 Technical Support Staff (TSS)

Note to TSS: Please do NOT use this notice if the application is under a final rejection.

PAGE 2/5" RCVD AT 4/18/2008 2:16:20 PM [Eastern Daylight Time] " SVR:USPTO-EFXRF-6/31" DNIS:2736500 " CSID:15106546166" DURATION (mm-ss):02-06

6. Fee Calculation (37 C.F.R. Section 1.16)

Regular Application

		CLAIM	S AS I	PILED	•	
Claims	Number Filed	Basic Fee Allowance	Number Extra		Rate	Basic Fee 37 CFR 1.16(\$710.00
Total Claims						
(37 CFR 1.16(c))	26	- 20 =	6	x	\$18.00	\$108.00
Independent Claims	 , ,, 		-		· · · · ·	
(37 CFR 1.16(b))	6	- 3 =	3	x	\$80.00	\$240.00
Multiple Dependent						
Claim(s), if any (37 CFR 1.16(d))				+	\$270.00	\$0.00
Filli	ng F∞ Calculatio					\$1,058.00
. Small Entity	y Statement(s)					
Statement th	at this is a filing	by a small entity	v under	: 37 C.F.R. Se	ctions 1.9 and	1.27 is made now.
	g Fee Calculation					\$529.00
. Fee Paymen	Fee Payment Being Made at This Time					
Enclosed Filin	g Fee					\$529.00
Tota	l Fees Enclosed					\$529.00

9. Method of Payment of Fees

Credit Card Payment Porm in the amount of \$529.00 is attached.

(New Application Transmittal-page 3 of 4)

PAGE 4/5 * RCVD AT 4/18/2006 2:16:20 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-6/31 * DNIS:2736500 * CSID:15106546166 * DURATION (num-ss):02-06

PTO/SB/17 (01-06)

Approved for use through 07/31/2008, OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE	TRANSI	ATTIN	Ļ
	For FY 200	06	

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 250

Complete if Known				
Application Number	09/927,104			
Filing Date	08/10/2001			
First Named Inventor	Francisco O'Meany			
Examiner Name	Eric Chang			
Art Unit	2116			
Attorney Docket No.	WCTI2001			

METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order Other (please identify):							
Deposit Account Deposit Account Number: 02-4375 Deposit Account Name:							
For the above-ident	ified deposit	account, the Din	ector is hereb	y authorized t	o: (check all th	at apply)	
	Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee						
Charge any a under 37 CFI		(s) or underpayr .17	nents of fee(s	Cred	it any overpay	ments	
WARNING: Information on thi	s form may b	ecome public. Cri	edit card Infor	nation should :	not be included	on this form. Pro	ovide credit card
FEE CALCULATION (A			e upon filin	g or may be	subject to	surcharge.)	
1. BASIC FILING, SEAF				<i>3,</i>		30.7	
i. bhoid i icino, bear	FILING	FEES	SEARCI	H FEES	EXAMINA	TION FEES	
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	mall Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEI			U	U	v	•	Small Entity
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 (50	25
	Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180						
Total Claims							
30 - 20 or HP =		x25	_ =25			Fee (\$)	Fee Paid (\$)
HP = highest number of tota Indep. Claims	daims paid () Extra Clair			sid (\$).			
-3 or HP =	PVRB 2518H	x	_ =	10121	•		
HP = highest number of inde		s paid for, if greate	r than 3.				
3. APPLICATION SIZE	3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer						
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) 100 = /50 = (round up to a whole number) x =							
4. OTHER FEE(S)		_	•				Fees Paid (\$)
	Non-English Specification, \$130 fee (no small entity discount)						
Other (e.g., late filing surcharge):							
SUBMITTED BY							
Signature	_>	-	Re	gistration No.	19,737	Telephone	510-654-6200
Name (Print/Type) H. Michael Brucker					Date 02/2	1/2000 03/13/06	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the emount of time you require to complete this form antidor suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Tradement Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need essistance in completing the form, call 1-800-PTO-9199 and select option 2.

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